229 Stevens Lane Livingston, TX 77351

Phone: 936-566-4000 Fax: 936-566-5300

REDACTED - FOR PUBLIC INSPECTION

June 30, 2015

Ms. Marlene H. Dortch, Secretary Federal Communications Commission 445 12th Street, S.W. Washington, D.C. 20554

Re:

Connect America Fund, WC Docket No. 10-90, 47 CFR § 54.313 Annual Reporting Requirements for High-Cost Recipients (Form 481)

Dear Ms. Dortch:

Attached please find Lake Livingston Telephone Company's high-cost support recipient annual report pursuant to 47 CFR § 54.313 (Form 481).

Lake Livingston Telephone Company is filing certain financial information, reported pursuant to 47 CFR §54.313(f)(2), as confidential under the November 16, 2012 Protective Order (DA 12-1857). Pursuant to that Order, each page of this filing has been marked "REDACTED - FOR PUBLIC INSPECTION." The non-redacted version of this information has been marked "CONFIDENTIAL INFORMATION - SUBJECT TO PROTECTIVE ORDER IN WC DOCKET NOS. 10-90, 07-135, 05-337, 03-109, GN DOCKET NO. 09-51, CC DOCKET NOS. 01-92, 96-45,WT DOCKET NO. 10-208 BEFORE THE FEDERAL COMMUNICATIONS COMMISSION." As such, Lake Livingston Telephone Company requests that the non-redacted version of its submission be withheld from public inspection.

Lake Livingston Telephone Company is also requesting confidential treatment of certain information being filed pursuant to 47 CFR § 54.202(a)(1)(ii)and 54.313(a)(1) (five year service quality improvement plan) under 47 CFR § 0.457 and 0.459. The redacted version of this filing has been marked "REDACTED - FOR PUBLIC INSPECTION." The non-redacted version has been marked "CONFIDENTIAL - NOT FOR PUBLIC INSPECTION."

Pursuant to 47 CFR § 0.459, Lake Livingston Telephone Company offers the following in support of its request for confidential treatment of certain information.

- Identification of the specific information for which confidential treatment is sought: Lake Livingston Telephone Company seeks confidential treatment of the five year service quality improvement plan required per 47 CFR § 54.202(a)(1)(ii) and 54.313(a)(1),
- Identification of the Commission proceeding in which the information was submitted or a description
 of the circumstances giving rise to the submission: Lake Livingston Telephone Company is
 providing the five year service quality improvement plan as part of its annual high-cost support
 recipient report per 47 CFR § 54.313.

- Explanation of the degree to which the information is commercial or financial, or contains a trade secret or is privileged: Lake Livingston Telephone Company considers the information to be highly sensitive in that it contains statements about the Company's future investment plans, and discusses specific equipment and strategies the Company will utilize to provide services.
- Explanation of the degree to which the information concerns a service that is subject to competition:
 Lake Livingston Telephone Company provides voice and broadband services that are in competition with various landline and wireless providers; thus, the investment data disclosed is related to services subject to competition to a high degree.
- Identification of any measures taken by the submitting party to prevent unauthorized disclosure:
 Lake Livingston Telephone Company makes the data being provided available only to employees, consultants, and attorneys on a limited, need-to-know basis.
- Identification of whether the information is available to the public and the extent of any previous disclosure of the information to third parties: The information is not publicly available.
- Justification of the period during which the submitting party asserts that material should not be
 available for public disclosure: Lake Livingston Telephone Company requests that the data provided
 be treated as confidential indefinitely. Due to the sensitive nature of the data, it would not be
 appropriate for public disclosure at any time in the foreseeable future.
- Any other information that the party seeking confidential treatment believes may be useful in assessing whether its request for confidential treatment should be granted: None.

Accordingly, Lake Livingston Telephone Company requests confidential treatment of the five year service quality improvement plan pursuant to section 0.457 and 0.459 of the Commission's rules.

The redacted version of this Form 481 submission will be filed via the Commission's Electronic Comment Filing System (ECFS) in the above-captioned docket.

If you have any questions about this filing, please contact the undersigned.

Sincerely,

Attachment

cc:

Charles Tyler
Telecommunications Access Policy Division
Wireline Competition Bureau
Federal Communications Commission
445 12th Street, S.W., Room 5-A452
Washington, DC 20554

FCC Foi	rm 481 - Carrier Annual Reporting Data Collection Form		(FCC Form 481 DMB Control No. 3060-0 uly 2013	986/OMB Control I	No. 3060-0819
<010>	Study Area Code	442104				
<015>	Study Area Name	LAKE LIVINGSTON TE	L			
<020>	Program Year	2016				
	Contact Name: Person USAC should contact with questions about this data	Terry Gentle				
<035>	Contact Telephone Number: Number of the person identified in data line <030>	9365664000 ext.				
<039>	Contact Email Address: Email of the person identified in data line <030>	tgentle@livingston	.net			
ANNUA	AL REPORTING FOR ALL CARRIERS				54.313 Completion Required	54.422 Completion Required
<100>	Service Quality Improvement Reporting		(complete attached works	sheet)	✓	
<200>	Outage Reporting (voice)		(complete attached works	sheet)	✓	✓
<210> <300>	Unfulfilled Service Requests (voice)	o outages to report		_ [✓	
<310>	Detail on Attempts (voice)					111111
				(attach descriptive doc	cument)	
<320>	Unfulfilled Service Requests (broadband)			_	✓	
<330>	Detail on Attempts (broadband)			(attach descriptive do	ocument)	
				(uccuen descriptive de	real menty	
<400>	Number of Complaints per 1,000 customers (voice)			_		
<410> <420>	Fixed 0.0 Mobile 0.0	—			✓	✓
<430>	Number of Complaints per 1,000 customers (broads	oand)			✓	111111
<440> <450>	Fixed 0.0 Mobile 0.0					No. 102 102 102 102 102
<500>	Service Quality Standards & Consumer Protection R	ules Compliance	(check to indicate certific	cation)	✓	√
	442104tx510.pdf		٦			
<510>			(attached descriptive	document)	✓	✓
<600>	Functionality in Emergency Situations 442104tx610.pdf		(check to indicate certific	cation)	✓	✓
	442104CX010.pdf					
<610>			(attached descriptive doc	ument)		· ·
<700>	Company Price Offerings (voice)		(complete attached work	(sheet)	√	
<710>	Company Price Offerings (broadband)		(complete attached work		□ ✓	
<800>	Operating Companies and Affiliates		(complete attached work	(sheet)		✓
	Tribal Land Offerings (Y/N)? Voice Services Rate Comparability Certification		f yes, complete attached work	ksheet)	<u> </u>	
110007	442104tx1010.pdf	<u>_</u>	∕es	•		
<1010>			(attach descriptive docu	ment)	√	
<1100>	Certify whether terrestrial backhaul options exist (res or No)	(if not, check to indicate	e certification)	✓	
<1110>			(complete attached work	ksheet)	√	
<1200>	Terms and Condition for Lifeline Customers	.	(complete attached work	ksheet)		✓
	Price Cap Carriers, Proceed to Price Cap Additional					
<2000> <2005>	Including Rate-of-Return Carriers affiliated with Pr	ice Cup Local Exchang	e Carriers (check to indicate certific (complete attached work			
	Rate of Return Carriers, Proceed to ROR Additional	Documentation Work	<u>ksheet</u>			

(check to indicate certification)

(complete attached worksheet)

<3000>

<3005>

(100) Se Data Co	(100) Service Quality Improvement Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	442104	
<015>	Study Area Name	LAKE LIVINGSTON TEL	
<020>	Program Year	2016	
<030>	Contact Name - Person USAC should contact regarding this data	Terry Gentle	
<035>	Contact Telephone Number - Number of person identified in data line <030>	9365664000 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	tgentle@livingston.net	, i
<110>	Has your company received its ETC certification from the FCC?	(yes / no)	
<111>	If your answer to Line <110> is yes, do you have an existing $\S54.202(a)$ "5 year plan" filed with the FCC?	(yes / no)	
<112>	If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service. Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.	442104tx112.pdf	t112.pdf
			Name of Attached Document
	Please select the appropriate responses below (Yes, No, Not Applicable) to confirm that the attached document(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to §54.202(a). The information shall be submitted at the wire center level or census block as appropriate.	m year	
<113>	Maps detailing progress towards meeting plan targets	Yes	SS
<1114>	Report how much universal service (USF) support was received	Yes	S
<115>	How much (USF) was used to improve service quality and how support was used to improve service quality		25
<117>	How much (USF) was used to improve service coverage and now support was used to improve service coverage. How much (USF) was used to improve service capacity and how support was used to improve service capacity.	ove service coverage Yes we service capacity Yes	253
<1118>	Provide an explanation of network improvement targets not met in the prior calendar year	Yes	55
	יי נובל ליום מתבומם לכתי		

 \$ Study Area Code \$ Study Area Name \$ Contact Name - Person USAC should contact regarding this data \$ Contact Telephone Number - Number of person identified in data line <030> \$ Contact Email Address - Email Address of person identified in data line <030> \$ Contact Email Address - Email Address of person identified in data line <030> \$ Contact Email Address - Email Address of person identified in data line <030> \$ Contact Email Address - Email Address of person identified in data line <030> \$ Contact Email Address - Email Address of person identified in data line <030> \$ Contact Email Address - Email Address of person identified in data line <030> \$ Contact Email Address - Email Address of person identified in data line <030> \$ Contact Email Address - Email Address of person identified in data line <030> \$ Contact Email Address - Email Address of person identified in data line <030> \$ Contact Email Address - Email Address of person identified in data line <030> \$ Contact Email Address - Email Address - Email Address of person identified in data line <030> \$ Contact Email Address - Emai	e Person USAC. The Number - ddress - Email	he - Person USAC should contact none Number - Number of per Address - Email Address of pe - Address of per - Address - Email Addres	t regarding this. rson identified is rson identified is cb3> Outage End Date	data in data line <03 in data line <03 Cutage End Time (442104 LAKE LIVINGSTON TEL 2016 Terry Gentle Terry Gentle 305 564000 ext. 305 tgentle@livingston.net CC2 CC2 CC2 CC2 CC2 CC3 CC4 Customers Affected Total Number of Custome Custome	TON TEL Exxt. Ingston.net <22> Customers Customers	<d>>d> Affected (Yes / No)</d>	<e>Service Outage Description (Check all that apply)</e>	<f>Did This Outage Affect Multiple Study Areas (Yes / No)</f>	<g> Service Outage Resolution</g>	<h><h><h>Preventative</h><h>Procedures</h></h></h>
	Person USAC ne Number - Idress - Email httage Start Date	should contact Number of per Address of pe 	rregarding this rson identified i rson identified i cb3>	data in data line <03(in data line <03(ston Nu	TON TEL xxt. cc2> Customers Customers	<d>>d> 811 Facilities Affected (Yes / No)</d>	<e>Service Outage Description (Check all that apply)</e>		<g> <g> Service Outage Resolution</g></g>	<h><h><h>Preventative</h><h>Procedures</h></h></h>
	Person USAC. Idress - Email 	should contact Number of per Address of pe Coutage Start Time	tregarding this. rson identified i rson identified i cb3> Outage End Date	data in data line <03(in data line <03(ngston.net cc2> Total Number of Customers	<d>><d><d>(d>)911 Facilities Affected (Yes / No)</d></d></d>	<e>Service Outage Description (Check all that apply)</e>		<g>> Service Outage Resolution</g>	<h><h><h>Preventative</h><h>Procedures</h></h></h>
	Person USAC. Idress - Email drage Start Date	should contact Number of per Address of pe Coutage Start Time	t regarding this roon identified ii rson identified ii rson identified ii cb3> Outage End Date	chata line <030 in data line <030 in data line <030 chata line <030 chata line <030 chata line <00 chata line <	ston Nu	xtngston.net <22> Customers	<d>>d> 911 Facilities Affected (Yes / No)</d>	<e>Service Outage Description (Check all that apply)</e>		<g>> Service Outage Resolution</g>	<h><h><h>Preventative</h></h></h>
	- Idress - Email Idress - Email - Cb1> Date	Address of peckbb.	rson identified in rson identified in cb3> Outage End Date	in data line <030 in data line <03 	Ston Nu	ngston.net <22> Cotal Number of Customers	<d>>d> 911 Facilities Affected (Yes / No)</d>	<e>> Service Outage Description (Check all that apply)</e>		<g>> Service Outage Resolution</g>	<h>>h> Preventative Procedures</h>
	cb1> Tutage Start Date	 	cb3> Outage End Date	cbd> Coutage End Time	ton Nu	<pre><c2> Customers Customers</c2></pre>	<d>>d> 911 Facilities Affected (Yes / No)</d>	<e>> Service Outage Description (Check all that apply)</e>		<g>> Service Outage Resolution</g>	<h>>h> Preventative Procedures</h>
Number Number	 \dots	 Outage Start Time			Customers Affected	<c2> Total Number of Customers</c2>	<d>><d> 911 Facilities Affected (Yes / No)</d></d>	<e>Service Outage Description (Check all that apply)</e>		<g> Service Outage Resolution</g>	<h>>h> Preventative Procedures</h>
NORS Reference Number	<01> Date Date Only Only Only Only Only Only Only Only	Outage Start Time			Number of Customers Affected	Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)		Service Outage Resolution	<n><n><n></n>PreventativeProcedures</n></n>
9	utage Start Date	Outage Start Time			Number of Justomers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)		Service Outage Resolution	Preventative Procedures
						Customers	(Yes / No)	all that apply)		Resolution	Procedures

Page 3

(700) Pric Data Colle	(700) Price Offerings in Data Collection Form	(700) Price Offerings including Voice Rate Data Data Collection Form	Data				FC Or Ju	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	3 Control No. 3060-0819
<010>	Study Area Code	nde			442104				
<015>	Study Area Name	ame			LAKE LIVINGSTON TEL	STON TEL			
<020>	Program Year				2016				
<030>	Contact Name	Contact Name - Person USAC should contact regarding this data	l contact regardii	ng this data	Terry Gentle	le			
<032>	Contact Telep	Contact Telephone Number - Number of person identified in data line <030>	er of person ider	utified in data line <	:030> 9365664000 ext.	ext.			
<039>	Contact Email	Contact Email Address - Email Address of person identified in data line <030>	ess of person ide	ntified in data line <		tgentle@livingston.net			
<701>	Residential Lo	Residential Local Service Charge Effective Date	ective Date	1/1/	/2015				
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<703>	<a1></a1>	<a2></a2>	<a3></a3>	 b1>	<	<	 	<92>	\$
	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fees
					See at	See affached worksheet			
)				

Collection	Data Collection Form						OMB Cont July 2013	rol No. 3060-0986/	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> Stud	Study Area Code			442104					
<015> Stud	Study Area Name			LAKE LIVINGSTON TEL	TEL TEL				
<020> Prog	Program Year			2016					
<030> Cont	act Name - Person US,	Contact Name - Person USAC should contact regarding this data	nis data	Terry Gentle					
<035> Cont	act Telephone Numbe	Contact Telephone Number - Number of person identified in data line <030>	d in data line <030>	9365664000 ext.					
<039> Cont	act Email Address - En	Contact Email Address - Email Address of person identified in data line <030>	ed in data line <030>	tgentle@livingston.net	ston.net				
<711>	<a1></a1>	<a2></a2>	 	 	\$	<d1></d1>	<d2></d2>	<d3></d3>	<d4>></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbos)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select)
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(800)	(800) Operating Companies			400 American A00
Data Coll	(add) Operating Companies Data Collection Form			F.C. Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<0T0>		442104		
<015>	Study Area Name	AKE LIVINGSTON TEL	TEL	
<020>	Program Year	2016		
<030>	: - Person USAC should contact regarding this data	Terry Gentle		
<032>	a line <030>	9365664000 ext.		
<039>	١.	tgentle@livingston.net	ton.net	
<810>	Reporting Carrier Lake Livingston Telephone Company			
<811>	Holding Company Lake Livingston Telephone Company			
<812>	Operating Company Lake Livingston Telephone Company			
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<813>	<a1></a1>		<a2></a2>	<a3></a3>
	Affiliates		SAC	Doing Business As Company or Brand Designation
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(900) Tr Data Co	(900) Tribal Lands Reporting Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	4427.04
<015>		LAKE LIVINGSTON TEL
<020>		2016
<030>		Terry Gentle
<032>	Contact Telephone Number - Number of person identified in data line <030>	> 9365664000 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>)> tgentle@livingston.net
<910>	Tribal Land(s) on which ETC Serves	
<920>	Tribal Government Engagement Obligation	
		Name of Attached Document
If your to conf demon § 54.31 <921> <922> <924> <925> <926> <926> <926> <927> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928> <928	If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached document(s), on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes: 6921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions. 6922> Feasibility and sustainability planning; 6924> Compliance with Rights of way processes 6925> Compliance with Land Use permitting requirements 6926> Compliance with Facilities Siting rules 6927> Compliance with Cultural Preservation review processes 6928> Compliance with Tribal Business and Licensing requirements.	Select Yes or No or Not Applicable

(1100)	(1100) No Terrestrial Backhaul Reporting	FCC Form 481
Data Co	Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	
<015>	Study Area Name	LAKE LIVINGSTON TEL
<020>	Program Year	
<030>	Contact Name - Person USAC should contact regarding this data	Terry Gentle
<032>	Contact Telephone Number - Number of person identified in data line <030>	9365664000 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030> tgentl	tgentle@livingston.net
<1120>	Please confirm whether terrestrial backhaul options exist within the supported area pursuant to § 54.313(g) (Yes, No).	ON
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(g).	Yes

2000) Pri	2000) Price Cap Carrier Additional Documentation	FCC Form 481
Data Colle	Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
ncluding	ncluding Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers	July 2013
<010>	Study Area Code	
<015>	Study Area Name	442104
<020>	Program Year	LAKE LIVINGSTON TEL
<030>	Contact Name - Person USAC should contact regarding this data	2016
<032>	Contact Telephone Number - Number of person identified in data line <030>	lerry Gentle
<039>	Contact Email Address - Email Address of person identified in data line <030>	996564000 EXL.
		tgentle@llVingston.net
Select the	Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a	lance as a recipient of Incremental Connect America Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and
Connect	Connect America Phase II support as set forth in 47 LFK § 54.313(b),(t),(d),(e). The information reported on this form and in the documents attached below is accurate.	tion reported on this form and in the documents attached below is accurate.
<2010> <2011a>	Incremental Connect America Phase I reporting 2nd Year Certification {47 CFR § 54.313(b)(1)i} 3rd Year Certification {47 CFR § 54.313(b)(1)ii}	
/2011b>	A++2chmont (A7 CED & EA 213/6\(\alpha\);;]	
72011027	Attacillient (47 CTN & 34.313(0)(1.1)))	
		Name of Attached Document(s) Listing Required Information
	Price Cap Carrier Receiving Frozen Support Certification {47 CFR § 54.312(a)}	
<2012>	2013 Frozen Support Calculation {47 CFR § 54.313(c)(1)}	
<20105	2014 1102511 34pport Calculation [47 CEN 8 54-313(c)/2)]	
<2015>	2016 and future Frozen Support Calculation (47 CFR § 54.313(c)(4))	
<2016>	Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)} Certification Support Used to Build Broadband	
<2017> <2018>	Connect America Pnase II Reporting {4/ C+K g 54.313(e)} 3rd year Broadband Service Certification 5th wear Rroadhand Service Certification	
<2019>		
<2020>	Please check the box to confirm that the attached document(s), on line 2021,contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.	2021, contains the required information III provide the number, names, and ccess to broadband service in the
,1000,		
<1707>	Interim Progress Community Anchor Institutions	
		Name of Attached Document(s) Listing Required Information

(nonc)	ate of hetail carrier Additional Documents	104 1100 101
Data Col	Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
		July 2013
ı		
<010>	Study Area Code	
<015>	Study Area Name	LAKE LIVINGSTON TEL
<070>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	TETY GENELE
<039>	Contact Email Address - Email Address of person identified in data line <0.30>	1908OF WARTH DAN I VINNAFT DAN
		33TTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTTT
CHECK 1	the boxes below to note compliance on its five year service quality plan (pursuan CFR § 54.313(f)(2). I further certify that th	CHECK the boxes below to note compliance on its five year service quality plan (pursuant to 47 CR § \$4.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.
		442104tx3010.pdf
		4
(3010)	Progress Report on 5 Year Plan	
	Milestone Certification (47 CTR § 34.313(1)(1)(1)	
		Name of Attached Document Listing Required Information
(3011)	Please check this box to confirm that the attached document(s), on line 3012 contains the required information pursuant to \$4.313 (f)(i)(i)), the carrier shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.	012 contains the required information pursuant to sesses of community anchor institutions to which began
		442104tx3012.pdf
(3012)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	
		Name of Attached Document Listing Required Information
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	
(3014)		
Please	check these boxes to confirm that the attached document(s), on line 301	Pease check these boxes to confirm that the attached document(s), on line 3017, contains the required information pursuant to $\delta = 54.313f/(2)$ compliance requires.
(3015)	Electronic copy of their annual RUS reports (Operating Report for	
]]
(3016)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows	sh Flows
(3017)	If the response is yes on line 3014, attach your company's RUS annual	
		Name of Attached Document Listing Required Information
(3018)	If the response is no on line 3014, Is your company audited?	(Yes/No)
	If the response is yes on line 3018, please check the boxes below to	
(0,00)	confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains	_
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a f	tatement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications 🗸
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows	ash Flows
(3021)	Management letter and audit opinion issued by the independent certified p	issued by the independent certified public accountant that performed the company's financial audit
	to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains:	
	COLUMNIA	
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant: or 2) a financial report in a	
	format comparable to RUS Operating Report for Telecommunications	
	Borrowers,	
(3023)	Underlying information subjected to a review by an independent certified mublic accountant	
(3024)	public accountaint. Underlying information subjected to an officer certification.	
(3025)		sh Flows
		442104tx3026.pdf
(3026)	Attach the worksheet listing required information	
		Mean of Make deed December 1 istin on December 1 left consolided

<010>	:010> Study Area Code	442104
<015>	Study Area Name	LAKE LIVINGSTON TEL
<020>	Program Year	2016
<030>	e - Person USAC should contact regarding this data	Terry Gentle
<035>	Contact Telephone Number - Number of person identified in data line <030> 9365664000 ext.	9365664000 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030> tgentle@livingston.net	tgentle@livingston.net

Financial Data	Summary
inan	ata (
_	inan

(3027) Revenue

(3028) Operating Expenses

(3029) Net Income

(3030) Telephone Plant In Service(TPIS)

(3031) Total Assets

(3032) Total Debt

(3033) Total Equity

2421965 330149

2960054

-

10993929

6528861 1685576

(3034) Dividends

4843285

Certification - Reporting Carrier	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	442104
<015>	Study Area Name	LAKE LIVINGSTON TEL
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Terry Gentle
<035>	Contact Telephone Number - Number of person identified in data line <030>	9365664000 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tgentle@livingston.net

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.

Name of Reporting Carrier:

Signature of Authorized Officer:

Date

Printed name of Authorized Officer:

Title or position of Authorized Officer:

Telephone number of Authorized Officer:

Study Area Code of Reporting Carrier:

Filing Due Date for this form:

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

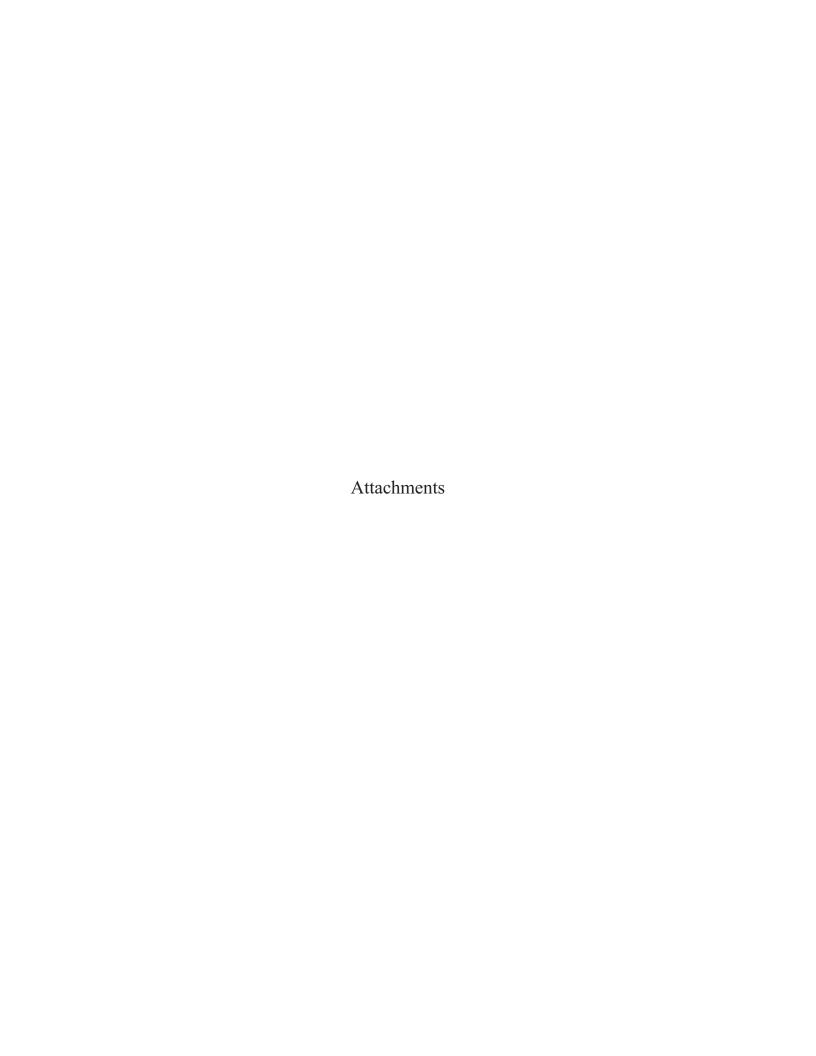
	tion - Agent / Carrier lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	442104
<015>	Study Area Name	LAKE LIVINGSTON TEL
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Terry Gentle
<035>	Contact Telephone Number - Number of person identified in data line <030>	9365664000 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tgentle@livingston.net

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

I certify that (Name of Agent)Dion_Nero also certify that I am an officer of the reporting carrier; my responsib agent; and, to the best of my knowledge, the reports and data provid	is authorized to submit the information reported on behalf of the reporting carrier. ilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized ed to the authorized agent is accurate.
Name of Authorized Agent: Dion Nero	
Name of Reporting Carrier: LAKE LIVINGSTON TEL	
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 06/23/2015
Printed name of Authorized Officer: Stephen Blount	
Title or position of Authorized Officer: President	
Telephone number of Authorized Officer: 9365664000 ext.	
Study Area Code of Reporting Carrier: 442104	Filing Due Date for this form: 07/01/2015
, •	by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment le 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients o	n Behalf of Reportir	g Carrier
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipi		
the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reporting Carrier: LAKE LIVINGSTON TEL	oorted nerein is accurat	e.
Name of Authorized Agent or Employee of Agent: Dion Nero		
Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date:	06/23/2015
Printed name of Authorized Agent or Employee of Agent: Dion Nero		
Title or position of Authorized Agent or Employee of Agent Senior Client Manager		
Telephone number of Authorized Agent or Employee of Agent: 9183769901 ext.		
Study Area Code of Reporting Carrier: 442104 Filing Due Date for this form: 07/01/2015		
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 4 18 of the United States Code, 18 U.S.C. § 1001.	17 U.S.C. §§ 502, 503(b), or	fine or imprisonment under Title



442104	LAKE LIVINGSTON TEL	2016	Should contact regarding this data Terry Gentle	<035> Contact Telephone Number of person identified in data line <030> 9365664000 ext.	COntact Fmail Address of person identified in data line <030>
<010> Study Area Code	<015> Study Area Name	<020> Program Year	<030> Contact Name - Person USAC should contact regarding this data	5> Contact Telephone Number - Number of person identified	9> Contact Fmail Address - Fmail Address of person identified
<010	<015	<020	<030	<035	<039

<701> Residential Local Service Charge Effective Date<702> Single State-wide Residential Local Service Charge

<703>

1/1/2015

Total per line Rates and Fees 16.48 Mandatory Extended Area Service Charge 0.0 State Universal Service Fee 0.48 State Subscriber Line Charge 0.0 Residential Local Service Rate 16.0 Rate Type
b1> FR SAC (CETC) <a3> Exchange (ILEC)
Lake Livingston <a2> State <a1> ΧĽ

FCC Form 481	OMB Control No. 3060-0986/OMB Control No. 3060-0819	July 2013
(710) Broadband Price Offerings	Data Collection Form	

	-	-			:				
<010>	<010> Study Area Code	a Code			442104				
<015>	Study Area Name	a Name			LAKE LIVINGSTON TEL	N TEL			
<020>	Program Year	ear			2016				
<030>	Contact Na	<030> Contact Name - Person USAC should contact regarding this data	d contact regarding	this data	Terry Gentle				
<032>	Contact Te	<035> Contact Telephone Number - Number of person identified in data line <030>	er of person identif	ied in data line <030>	, 9365664000 ext.				
<039>	Contact En	<039> Contact Email Address - Email Address of person identified in data line.	ess of person identii	fied in data line <030>	> tgentle@livingston.net	ston.net			
<711>	<a1></a1>	<a2></a2>	 b1>	<bs></bs> <bs></bs> <br< td=""><td><c> <d1></d1></c></td><td><d2></d2></td><td>-<q3></q3></td><td></td><td><d4></d4></td></br<>	<c> <d1></d1></c>	<d2></d2>	- <q3></q3>		<d4></d4>
			ci+a	potelimod otes	Total Rates	Broadband Service -	Broadband Service - Broadband Service	Usage Allowance	Usage Allowance
	State	Exchange (ILEC)	Residential	State negulated	and Fees	Download Speed	Download Speed (Ilpload Speed (Mhps) (GB)	(GB)	Action Taken
) Water			(Mbps)	ولانقلقا والمراقة	,	When Limit Reached {select}
	TX	Lake Livingston	25.95	96.0	26.91	0.512	0.768	1.0	Other, None
	TX	Lake Livingston	41.95	1.55	43.5	1.5	0.768	1.0	Other, None
	XI	Lake Livingston	69.95	2.58	72.53	3.0	0.768	1.0	Other, None
	Áμ	Lake Livingston	L	3 36		(0 7 5 0	c	Other, None

1.0

0.768

5.0

94.31

3.36

90.95

Lake Livingston

XI

REDACTED IN ITS ENTIRETY

Attachment File: 442104tx510.pdf

LAKE LIVINGSTON TELEPHONE COMPANY - SAC 442104

FCC Form - Program Year 2016

Line 510

<u>COMPLIANCE WITH SERVICE QUALITY STANDARDS AND CONSUMER PROTECTION</u> <u>RULES - §54.313(a)(5)</u>

Lake Livingston Telephone Company ("Lake Livingston" or "the Company") complies with all applicable service quality standards and consumer protection rules as required by the Public Utility Commission of Texas ("PUC") and the Federal Communications Commission ("FCC").

The rates, terms and conditions under which the Company operates are identified in its Local Exchange Tariff, which is approved by the PUC. The Company's tariff contains provisions regarding its customer service and protection practices, including resolving customer disputes, applying for, refusing, disconnection and cancellation of service. Rates and terms of service are disclosed to customers upon application for service as part of a packet of information for new customers.

Service quality standards are established by the PUC and Lake Livingston consistently meets or exceeds those requirements. The Company provides quarterly reports to the Texas PUC pursuant to the commission's rules.

The protection of its customers' privacy and information is a constant part of Lake Livingston's quality of service. The Company has a policy and operating procedures that comply with the FCC's Customer Proprietary Network Information ("CPNI") rules (47 C.F.R 64.2001 – 64.2011). Certification of Lake Livingston's compliance with the FCC's CPNI rules is filed with the FCC annually.

Statement Regarding the Ability to Function in Emergency Situations 47 CFR § 54.313(a)(6) Form 481, Line 610

Lake Livingston Telephone Company (LLTC) is an incumbent local exchange carrier operating in the state of Texas, and is an eligible telecommunications carrier (ETC) designated by the Texas Public Utilities Commission (TPUC). As such, LLTC is subject to the regulatory authority of the TPUC and operates under the relevant rules and laws of the state of Texas.

LLTC is subject to TPUC rules regarding the ability to remain functional in emergency situations by (1) maintaining at least eight hours of backup power to ensure functionality without local alternating current (AC) commercial power, (2) establishing the ability to reroute traffic around damaged facilities and to manage traffic spikes resulting from emergency situations, and (3) establishing procedures for employees to follow in an emergency to prevent or minimize interruption or impairment of telecommunications services.

LLTC has 2 fixed generators at the Central Office. LLTC also has 6 portable generators capable of providing the required level of backup power, and that can be deployed as necessary to LLTC's switching and remote sites. LLTC's network is capable of rerouting traffic around damaged facilities, although this ability is not absolute and may be limited in certain circumstances. However, LLTC follows all industry standard practices in ensuring its network remains functional during different types of emergency situations.

Statement Regarding Voice Rate Comparability 47 C.F.R. § 54.313(a)(10) Form 481, Line 1010

Lake Livingston Telephone Company is a rural, rate of return regulated incumbent local exchange carrier operating in the state of Texas, and is an eligible telecommunications carrier (ETC) designated by the Texas Public Utilities Commission (TPUC). As such, Lake Livingston Telephone Company is subject to the regulatory authority of the TPUC and operates under the relevant rules and laws of the state of Texas.

Lake Livingston Telephone Company hereby certifies that the pricing of its voice services is no more than two standard deviations above the national average urban rate for voice service, \$47.48, as specified in the March 20, 2014 Public Notice issued by the Wireline Competition Bureau of the Federal Communications Commission.

Lake Livingston Telephone Company's residential voice service rates, including state fees and the federal subscriber line charge (SLC) are as follows.

Monthly rate for Lake Livingston exchange is \$23.03. Average monthly rate is \$23.03.

Progress Report on 5 Year Plan – Milestone Certification 47 C.F.R. § 54.313(f)(1)(i) Form 481, Line 3010

Lake Livingston Telephone Company hereby certifies pursuant to 47 CFR 54.313(f)(1)(i) that it is taking all reasonable steps to provide, upon reasonable request, broadband service at actual speeds of at least 4 mbps downstream and 1 mbps upstream, with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to comparable offerings in urban areas, and that requests for such service are met within a reasonable time frame.

Community Anchor Institutions 47 C.F.R. § 54.313(f)(1)(ii) Form 481, Line 3012

Lake Livingston Telephone Company did not begin providing broadband service to any community anchor institutions during 2014. The Company had previously provided broadband service meeting the Commission's public interest obligation standards to all community anchor institutions in its study area and, to the company's knowledge, no new community anchor institutions began operating in the Company's study area during 2014."